

QMC Memento Order Form

Name: _____ Address: _____

Daytime contact phone number: _____ Email: _____

I would like to order (tick the appropriate boxes):

<input type="checkbox"/>	Plaster Rose:	Catalogue Number (appears under photograph of Rose):	Price \$
	<input type="checkbox"/> R-01 <input type="checkbox"/> R-02 <input type="checkbox"/> R-03 <input type="checkbox"/> R-04	(\$1,000/rose)	_____
	<input type="checkbox"/> I would like FREE delivery of my Plaster Rose to the above address		

<input type="checkbox"/>	Photographic Composition:	Catalogue Number (appears under photograph):	Price \$
	<input type="checkbox"/> B01 <input type="checkbox"/> C-01 <input type="checkbox"/> W-01	(B/C \$300; W \$325)	_____
	<input type="checkbox"/> I require delivery ⁽¹⁾ to the above address (Wellington: \$9.50; Other North Island: \$15.50; South Island: \$29.80)		+ postage: _____
			Total Price _____

<input type="checkbox"/>	90th Jubilee Pictorial:	Number of books _____	Price \$
		(\$25/book)	_____
	<input type="checkbox"/> I would like FREE delivery of my Pictorial to the above address		

<input type="checkbox"/>	Truth Rose:	Number of roses _____	Price \$
		(\$25/rose)	_____
	<input type="checkbox"/> I require delivery ⁽¹⁾ to the above address (\$15.50/rose)		+ postage: _____
			Total Price _____

<input type="checkbox"/>	QMC Puppy:	Number of puppies _____	Price \$
		(\$25/puppy)	_____
	<input type="checkbox"/> I require delivery ⁽¹⁾ to the above address (\$5.50 for up to 3 puppies)		+ postage: _____
			Total Price _____

<input type="checkbox"/>	Graffiti Print:	Catalogue Number (appears next to photo in gallery e.g. F01-001): _____	Price \$
		(\$100/print)	_____
	<input type="checkbox"/> I require delivery ⁽¹⁾ to the above address (\$15.50/print)		+ postage: _____
			Total Price _____

(1) For deliveries outside New Zealand please contact the Development Office on email: development@qmc.school.nz for a price.

Please **sign** to confirm your order: _____ I enclose a cheque (payee Queen Margaret College) for \$ _____

Please return this form & payment to: QMC Development Office P O Box 12 274 Thorndon Wellington 6144. THANK YOU!